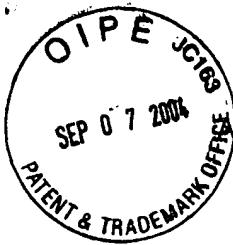


IFW



Appln. No. 10/812,114

MATP-650US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln. No: 10/812,114
 Applicant: Joseph T. Rodolico
 Filed: March 29, 2004
 Title: METHOD AND APPARATUS FOR PROCESSING TELEVISION SYSTEM
 MESSAGES RECEIVED WHEN A DEVICE IS IN A LOW POWER MODE
 TC/A.U.: 2614
 Confirmation No.: 1521
 Docket No.: MATP-650US

SUBMITTAL OF FORMAL DRAWINGS

Mail Stop PGPUB Drawings
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

SIR:

Enclosed are two (2) sheets of formal drawings for the above-identified application.

Respectfully Submitted,

Kenneth N. Nigon, Reg. No. 31,549
 Stephen J. Weed, Reg. No. 45,202
 Attorney for Applicant

SJW/tmb

Dated: September 2, 2004

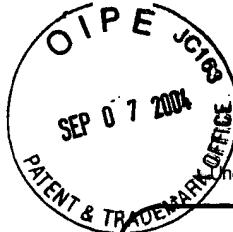
Suite 301
 One Westlakes, Berwyn
 P.O. Box 980
 Valley Forge, PA 19482-0980
 (610) 407-0700

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Total Number of Pages in This Submission 4

Application Number	10/812,114
Filing Date	March 29, 2004
First Named Inventor	Joseph T. Rodolico
Art Unit	2614
Examiner Name	
Attorney Docket No.	MATP-650US

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Submittal of Formal Drawings
Remarks:		

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

Firm or Individual Name Signature	Stephen J. Weed 	Registration No. (Attorney/Agent)	45,202
Date	September 2, 2004		

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